

TRANSCRIPT

LEGISLATIVE COUNCIL LEGAL AND SOCIAL ISSUES COMMITTEE

Inquiry into the use of cannabis in Victoria

Melbourne—Wednesday, 21 April 2021

(via videoconference)

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Mr David Limbrick

Mr Edward O'Donohue

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Ms Sheena Watt

WITNESSES

Mr Gulliver McLean, Research and Advocacy Officer,

Ms Julia Daly, Operations Manager, and

Mr Jesse Colling, Victorian Campus Teams Manager, Students for Sensible Drug Policy Australia (SSDP Aus).

The CHAIR: Welcome back, everyone. I am very pleased to say that we have been joined by the Students for Sensible Drug Policy Australia, and with us today we have Gulliver McLean, Jesse Colling and Julia Daly. Thank you all for making the time and thank you for your submission to us today.

Joining me on the committee and in this hearing we have Tien Kieu, the Deputy Chair; Kaushaliya Vaghela; Sheena Watt; and Tim Quilty. And we will have David Limbrick and possibly Georgie Crozier coming in and out of today's session.

So thank you all. I understand you have a presentation to present, so if you would like to present that to us now, we will open it up for committee questions afterwards. Thanks very much.

Visual presentation.

Mr McLEAN: Thanks, Fiona. We would like to thank the committee first. Thanks for the opportunity to present at this hearing. We really appreciate it. We also acknowledge that we are meeting on the lands of the Wurundjeri and the Boon Wurrung and acknowledge their elders, past, present and emerging. This land was never ceded. SSDP Australia recognises that Australia's drug wars are steeped in a history of racism and that the harms of drug use and drug policies also disproportionately impact marginalised communities.

Ms DALY: SSDP is the only youth-led organisation in Australia that connects and empowers young people and students to change drug policies and reduce drug-related harms. We are underfunded but conduct a range of activities, including community building, research, education and advocacy. We have also found systemic issues in scaling our community outreach and safe engagement with young people. Despite these challenges, we have spent the last short five years pioneering helping young people at universities, TAFEs and nightclubs to overcome stigma and criminalisation to engage with drug policy. Our submission is the culmination of lived experiences with cannabis consumption and the expertise and research of students in a range of fields, including politics, social services, economics, biochemistry, alcohol and other drugs and more.

Mr McLEAN: I am Gulliver. I am a 26-year-old Victorian. I recently got a prescription to use medical cannabis, so I finally feel comfortable actually talking about my journey publicly. I have used cannabis since I was 17. Even under prohibition it was always easy to find cannabis, but it was not always easy to find a good drug education. All my school ever told us was, 'Don't use drugs', so I hid my use from my teachers and my parents. I loved cannabis. It helped me be happy, but I became dependent on it for many years and had to waste a lot of time and go through a lot of pain figuring it out all on my own.

I want to ensure that other young drug users do not make the same mistakes that I did, and as a peer educator with DanceWize and through doing a lot of outreach with SSDP I have had thousands of honest conversations with other young drug users. I know that those chats help, but changing drug policies would help so much more. Now as SSDP's Research and Advocacy Officer I am grateful that I get to focus on talking to young people and politicians about why prohibition just makes drugs more dangerous. But there is a lot more work to be done to get more young people involved in this debate. For example, I was at the 420 Rally yesterday in Melbourne, and lots of young people there had no idea this inquiry even existed.

Ms DALY: I am Julia. At 19 I migrated from Massachusetts, United States, where cannabis is now legal recreationally. Growing up my parents sometimes preferred a joint over drinking on Friday night, especially with my stepfather's troublesome relationship with alcohol. They had to live with fears—of losing their job, losing custody of their children and ending up with a criminal record. I never knew they consumed cannabis until I was a young adult. My parents never urged me to experiment with substances, nor did they condone or condemn it. They understood that curiosity is natural in a young person. Their job was to keep me as safe as possible, and the best way to do that was to foster an honest conversation about substances and their

relationship with me and my peers. A sincere thanks to my parents for providing me with the substance education that school systems and governments often fail to provide. Thanks to them I am alive, safe and healthy. I am a fierce, empathetic representative, calling for an end to the criminalisation of cannabis, which is the root of so many harms.

Mr COLLING: My name is Jesse. I am a young person, and I have been using illicit drugs recreationally since I was a teenager. The first illicit substance I used was cannabis when I was 17 years old. Like many people at that age, the fact that it was illegal had no effect on my decision to try it. At the time it was just another thing that I was not telling my parents or teachers, and like the vast majority of young people I know that use illicit substances I consider myself to be a productive member of society and a positive influence on my community. I currently work as a community development worker in Collingwood, and I volunteer for SSDP as the Victorian campus network manager and also as a team leader and key peer educator for the harm reduction program DanceWize. I am here today to share with you some of my stories and give you an insight into the relationship that young people have with cannabis and other illicit substances through the lens of harm reduction.

Ms DALY: We believe that the best way to promote broader public health, reduce harms for young people and prevent criminal activity related to cannabis is by legalising, regulating and taxing it. We support placing age restrictions on cannabis sales and the creation of a system of taxes and duties, with revenues going back to public health initiatives. It is our experience that cannabis dealers will not ask for your ID, and they carry a variety of other drugs, with varying harms and purities. Cannabis is only a gateway drug because it is illegal. Evidence from overseas suggests that home growing, retail sales and gifting small quantities to friends and family are all very important strategies in displacing the black market for cannabis.

Beyond these risks of the black market the impacts associated with processing young people through the justice system have lasting impacts on their ability to be a part of their community. As a part of the legalisation process, SSDP Australia calls on the government to find and expunge criminal records rather than requiring eligible individuals to apply, and further, to ensure that those disproportionately impacted by prohibition are provided with opportunities to re-engage with their communities through a regulated, safe cannabis market.

Mr McLEAN: Young people who use cannabis are disproportionately impacted by the harms of cannabis use, cannabis policing and stigma towards cannabis users. Compared to all other age groups, young people are more likely to use cannabis, to be criminalised for their use and also to be stigmatised for their use. We also believe that young people are more likely to be harmed by their use and harmed more severely, but the available research is inconclusive. For example, the stats vary dramatically. Australia does not even have clear evidence on how many young people use cannabis. The last national drug strategy household survey in 2019 found that 24 per cent of 20- to 29-year-olds had used cannabis in the last 12 months. That is the highest for all age groups. But Triple J surveyed more young people, aged 18 to 29, and found that 53 per cent had used in the last 12 months. That is double, so that massive difference alone I think highlights that more research needs to be done.

Mr COLLING: We believe that the government must bring the standard of health promotion campaigns into the current era through a use of peer-led interactive digital campaigns that are currently relevant and culturally relevant to young people that use social media today. Current and previous health promotion campaigns, such as the Stoner Sloth campaign that was commissioned by the New South Wales government a few years ago, as well as drug education being taught in schools that did not follow the principles of harm reduction, have led to detrimental effects on young people who use cannabis. I want to share with you a story that illustrates what I mean by this.

Last year I was providing a harm reduction service at a school's event down in Rye. As a peer who was open and honest about being a user, I provided a space for these young people to talk about their experiences with drugs. For many of them it was the first time they had ever talked to an older person about their drug use. Some of them had not even told their own friends. There were many lovely stories and funny tales, but there were also many instances where these young people shared stories of serious trauma that they had experienced. I even talked to a young girl that was 17 years old who had been sexually assaulted, but because she was high on cannabis at the time of the incident, she was scared to tell anyone about it. This story is tragic, and unfortunately it is far too common. We are telling you as young people with lived experience it is caused by stigma, following years of non-evidence-based policy. If the drug education this young person received had

followed the principles of harm reduction and included her in the conversation and taught her how to talk about drugs herself, it would likely have been a significantly different outcome.

We would also like to acknowledge and thank the existing contributions to cannabis research made by the government, but we would like to call for more through recommendations 19 and 20 of our submission. The research that exists today is heavily focused on the harms caused by cannabis, but very little research is done on the cultural aspects of cannabis and especially research into understanding recreational usage trends. We believe that to properly address the harms caused by cannabis, it is essential that we understand the contexts that cannabis is used in.

Ms DALY: We are currently surveying young people to learn more about their thoughts on cannabis policy. We encourage any students or young people watching this to take the survey and get involved with SSDP. We would also like to welcome ongoing relationships with Parliament and hope to establish a youth panel to advise on drug policy reform and to help co-develop health promotion campaigns.

Lastly, SSDP would like to acknowledge some of the most recent breakthroughs in cannabis research and policy locally and around the globe, including the passing of the Spent Convictions Bill in Victoria, the research recently released by the University of Sydney this month regarding how long it takes for cannabis impairment to subside and the legalisation of cannabis in Mexico and the US states of Arizona, Montana, South Dakota and New Jersey. Again, thank you for the opportunity to present at this public hearing.

The CHAIR: Thank you. Julia, while you are finishing off on your screen, I just neglected to mention—and I know it would have been in the information that you received from us—and will just touch on the parliamentary privilege that is awarded to you as witnesses for the committee. Under our *Constitution Act* and under the provisions of our Legislative Council standing orders, everything that you provide—the information that you provide to us today—is protected by law and you are protected by that privilege. However, any comments that you may make outside this hearing may not have the same protection. Also, I need just to say that any false evidence or misleading of the committee may be considered a contempt of Parliament. I apologise for not saying that to you prior to your opening remarks, but I very much appreciate the opening remarks and I very much appreciate the submission. We will open it up for discussion. Thank you very much, everyone. I will pass it over to Deputy Chair Tien Kieu.

Dr KIEU: Thank you, Chair. Thank you to the SSDP for your presentation today, and I will also comment on your courage and your frankness and honesty. I have many questions, but because of the limit on time I would just like to really ask you one particular one. There is a lot of evidence and studies about the use of cannabis, the harms and also the age group. According to some study, people may start using cannabis at a young age. Some of you started when you were only 17. It also says that people will drop off the use of cannabis around the 29- or 30-year mark. So is this the evidence that you see in your cohort? And for you, yourselves—being protected by parliamentary privilege—would you personally say that you will continue using it, in the case of Gulliver, or do you think that you might be able to wean off it because of some of the harmful effects that you have experienced yourself?

Mr McLEAN: Thanks, Tien. And first of all, Fiona, we did know about parliamentary privilege, so do not worry about that. That is fine.

The CHAIR: Thanks, Gulliver.

Mr McLEAN: It is good to just comment. Even with parliamentary privilege it does not necessarily make us feel comfortable talking about everything. But anyway, to the question. First of all, the average age that young people start is 16.8 years, so Jesse and I were pretty bang on average. I think that, yes, 20 to 29 is the age that most people use cannabis and will use it a bit more regularly. I think, yes, it is something that a lot of people age out of, but I think that still means that we should legalise it. I do not think that just because it is just this temporary thing that young people do that means that prohibition is working. All the harms are still there for that age group and could be made way better if we legalised.

Ms DALY: I think, to add to that from experiences seen in my home country where I grew up, if you compare it to substances such as alcohol, which do have very similar harms for young people who start to consume at too young of an age or who consume in excess, most of society does not stop drinking after age 29. They, hopefully, through their young time avoid having any terrible adverse experiences with their

consumption of substances such as alcohol and as they get older and more mature learn how to have a healthy relationship with them and use them in times of celebration or in times of social gatherings. So I think that you have to look at it from a cultural context as well. Yes, we do acknowledge the harms, but there are harms of other legal substances too that are considered at those ages.

Mr COLLING: Lastly, I just wanted to add that I think one of the big reasons why at 29 this usage drops off is due to the fact that as people go into their 20s and start being exposed to different cultures and different ways of doing drugs they start getting exposed to that drug education that they missed out on as a teenager. What that means is they start finding different ways to self-medicate for whatever their problems are that they have. For example, I know a lot of young women who use cannabis to treat period pain. This is really, really common amongst young people until they get a little bit older and they have done a little bit more research and been exposed to a few more ideas. It is not until then that they can actually start thinking about different strategies and ways of managing that pain that do not involve cannabis.

The CHAIR: Thank you.

Mr McLEAN: I also just want to add that I think it is a misunderstanding to say that people age out of it, because if you actually look at the stats, people over the age of 50 are actually the most likely group to use once a week or more.

Dr KIEU: Thank you.

The CHAIR: Interesting. Thank you all. Kaushaliya.

Ms VAGHELA: Thanks, Chair. Thanks, Gulliver, Julia and Jesse, for your submission. I would like to ask a question regarding the recommendations that you have put in your submission, particularly recommendations 19 and 20 which Jesse highlighted. Those two recommendations are basically asking for funding for more research so that we can find out what are the harms and benefits of cannabis use and then pass on any regulatory changes. Are you saying that we do not have enough research data to make the decision whether the use of cannabis should be legalised or decriminalised? Is that what you are suggesting?

Mr COLLING: We are suggesting that there definitely is not enough data overall. But one of the main things that we are trying to allude to is that the way the data is collected is actually tainting the data itself. When a researcher goes and asks a bunch of young people how they use cannabis in this clinical setting, they are very unlikely to get the real answer. We have experienced through years of talking to people about drugs in all different contexts that it takes a lot for people to actually share and be fully honest about what they do when it comes to their drug use and how it affects their lives. It takes peers to be able to get the truth out of people and so we recommend that at least some of the research needs to be peer-led or needs to be conducted by peers to be able to get the real data to understand how people use and why they are using.

Ms VAGHELA: So then should we wait until we get the evidence from these research centres before we as a committee or as a society or as a government make the decision to either support the legalisation or decriminalisation or otherwise?

Mr McLEAN: I just want to clarify the position. There is more than enough evidence to say that prohibition does not work and that legalisation is better. We know from all the places around the world that have legalised that the sky has not fallen in and things are better. I think what we are actually trying to say is just because we know it is better does not mean we should not be doing more research to make sure that it is as best as possible. If we are going to make sure that we are doing good research, young people and drug users need to be involved in that.

The CHAIR: Great. Thanks for that clarification.

Ms VAGHELA: Thank you.

The CHAIR: Thank you. David.

Mr LIMBRICK: Thank you, Chair, and thank you, SSDP, for appearing today and your excellent, very detailed submission. I wonder if I could ask maybe Julia a question about one of the things in there, one of the harms of cannabis which is not talked about much, which is the fact that many people mix it with tobacco. We

all know that tobacco has serious harm. What sort of effect on that harm do you think legalisation might have? Your submission mentioned alternate ingestion methods which reduce harm, such as vaporising and edibles and things like that. I would be interested in your thoughts on that.

Ms DALY: Thank you for your question. It is a topic I am actually very personally passionate about as culturally in America most of us growing up in the States did not put tobacco into our cannabis. I got here and was a bit shocked to be quite honest, and so I asked a lot of my peers here because that is what I was taught to do from my parents: try and figure out why. There are a couple of reasons. It is cheaper when you spin it, is what a lot of the young people say. Cannabis is remarkably expensive here on the black market. The quality of the cannabis is not that great either, to be quite honest. So they spin it for those reasons.

If you look into reasons why legalisation and alternative methods of consumption could move people away from that, accessibility and actually reasonable quality would lead people away from looking for the head spins of nicotine and the benefits of mixing two substances to get a different feeling. Also a lot more, I guess, education around it. You could take some of the funding and create more awareness. And as you said, the accessibility to vaping products, to the ability to make edibles, which takes—it is smelly; let us put it that way. And so if you are living in an apartment, if you are living with your parents or something, it is a lot easier to sneak out if you are a young kid and smoke a joint than it is to cook brownies in your kitchen. So if you look at those types of things, if you legalised it, if you created this bit of acceptability, if you created a retail market where they are using a commercial smelly kitchen instead, you could create less harmful outcomes on people's lungs most definitely.

Mr LIMBRICK: Thank you. I wonder if I have time for one other quick question.

The CHAIR: Yes, you do. You have a little bit of time, David.

Mr LIMBRICK: Another question that I am interested in which we have spoken a bit about with other witnesses and you have covered in your submission is the issue of market participation and equity in market participation. I know that this has been a problem in some places that have legalised. People maybe had dreams of starting a business or something like this and then they found out that either the regulations or licensing were too difficult for them to access, or maybe they had a possession record or something and that was totally preventing them from participation in the market. What are some of your views on how we should approach, if we went down that legalisation route, ensuring that people have that ability to participate in these markets?

Ms DALY: I think it goes much more beyond just grant funding. You can put grant funding out there, but it is about who knows to access the grant funding, and we are looking to target a population that does not have a lot of faith in the government or a lot of engagement with their community. It is going to take a bit of reaching out—a bit of reparation, so to speak. Think about people in America who have had their bank loans for their cannabis shop rejected because they had a criminal record. Think about other situations where they were struggling to get funding and the only people who really managed to get funding were those who had connections. We have to think about those systemic issues. Beyond just access to grants and such, what is stopping these people from being business owners? What is stopping these people from engaging with their communities? I think that that is where, as they have mentioned in research, it would be really cool to research among the social projects the barriers for these people from re-engaging with the community.

Mr LIMBRICK: Thank you.

Mr McLEAN: I would also add that we have got a list of all the young people that have ever committed a cannabis offence. Young people are the most likely to be criminalised for cannabis. Between 2007 and 2017 young people aged under 21 accounted for 41 per cent of all cannabis-only offence cases. That is more than any other age group. Those thousands of young people—we know who they are. Send them an email and say, 'Hey, do you want to actually get support to enter the cannabis market? Because we know that we screwed you over'.

Mr LIMBRICK: Thank you.

The CHAIR: I hope we kept their email addresses. It is interesting idea, Gulliver, thank you. Sheena.

Ms WATT: Thank you, Chair. And thank you so much, SSDP, for your presentation today and for your very detailed submission. I wanted to talk about the public health campaigns in particular. You spoke about the importance of having public health campaigns that are effective in engaging with younger audiences. Can you

expand on the role you see for school-based education programs and primary prevention programs beyond broader, mass-market public health campaigns? Is that something that you have got some comments on?

Mr COLLING: Absolutely, yes.

Ms WATT: Is that you, Jesse? Okay, thank you.

Mr COLLING: Yes, absolutely. I am quite an avid watcher of lots of different channels and different types of media that give off drug education. I like to help some of my friends produce some media around drug education. And what we have found out about how young people actually use this drug education is they need to be able to interact with it. They need to be able to share it. They need to be able to use on multiple platforms. It needs to be a combination of videos. It needs to be using things like memes. It needs to be able to create and start conversations where young people can share stories and create the beginning of a conversation rather than just a lecture format that they may have been receiving the past. It is really important.

What we have seen in some of the research that we have done is that young people respond really well to complex messaging when they are allowed to interact with it and when they are allowed to engage with the content. Rather than just a dumping of a huge amount of information in one go and then saying, 'That's it, that's all you get', it scales up as they age, and it starts with teaching them simply how to have the conversations about drugs, how to interact with others and how to share information about drug safety.

Mr McLEAN: Yes. Can I add—I will go straight back to you, but I do want to add some stuff as well if I can.

The CHAIR: Yes. Go, Gulliver.

Mr McLEAN: I think high school drug education needs a complete overhaul. It is misinforming. It is like, 'Don't do drugs', and it is also stigmatising, which then means that young people are going to be less likely to feel comfortable talking to their friends, their teachers and their family about what they are actually doing. Nearly 40 per cent of people who are school aged have a stigmatising attitude towards other young people that use cannabis. That means that, you know, if you are going around as a young person using cannabis, you have a hunch that every second person you meet is going to be stigmatising towards you if you say something about the fact that you use cannabis. That itself closes down so many conversations that could be helping people feel a sense of social connection and share skills.

The other part is that our education needs to understand that most people that use cannabis are using it because they think it is fun. The majority think it is fun; that is why they use. So any education needs to acknowledge that. It needs to actually call out the fact that most young people know that it is fun to use cannabis. Anything that is trying to avoid that fact is just going to fail; it is not going to connect with them. I also think that any other education needs to be tailored to the young people that are going to be at risk of the most harm, so talking about how regular use can be really dangerous if you then fall into that really small percentage of young people that end up using regularly—it is a small amount, but that I think is where the resources need to be focused—and making sure that if they do end up in that small category, they actually still feel comfortable talking to someone about it, because otherwise they are just going to continue to feel isolated.

The CHAIR: Thanks. Thanks, Sheena. Tim.

Mr QUILTY: Great submission—I agree with pretty much all your recommendations. Is there a tension between your recommendation 8, for being able to cultivate it at home, and some of the other recommendations around regulating, labelling, controlling the age at which someone can buy it and taxing it? How do you see those fitting together?

Ms DALY: There are many different approaches to it, and although we have highlighted and suggested many different models that have worked overseas, we do understand that Victoria's situation is unique and Australia in general is unique. So we have highlighted some, but we will have to think very carefully as we move forward about how we would adapt those to work for us. I do not think that they I guess disagree with each other in points as there are many ways that you can control it, the same way that there are options to home brew alcohol. People are not worried about those finer details. You can look at different details: do you tax the products that you use to make them, be it seeds, for example, for cannabis? Where do you get seeds from? Is there someone overseeing and regulating seeds? Is there a regulation in terms of where cannabis plants can be

placed and access for children? For example, in my home state, when they legalised there are very strict rules that cannabis has to have a certain height fence and a locked area in your backyard if you have it in your backyard, and if it is in your home, it has to be in a locked closet or something that children cannot access—the same way you would look at guns, the same way you would look at alcohol, the same way you would look at a lot of other substances or things that people use that need to be regulated and kept safe and out of the hands of certain young people.

Mr QUILTY: Okay.

The CHAIR: Thank you, Tim, and thank you, Julia. I just wanted to tease out your thoughts on the inaccuracy of the statistics, because certainly I had not seen the Triple J survey until I read about it in your submission. I had always been working on the household drug survey, and the figures are startlingly different. I wonder if you care to comment as to why you think there is such a difference between those two surveys.

Mr McLEAN: I think the Triple J one is probably far better advertised amongst all young people, so it is going to reach more young people. That is probably the most important thing. Yes, I think the household strategy probably needs more funding and more people actually going out trying to get more people to use it. The way that it does its sample, it just means that the same people are going to get the call and be like, 'What? I don't want to do that'. So it is always going to be hard to get the stats. I think the best way to get better stats is if you actually make it clear that this is going to help more people, and so you can actually then turn it from, 'It's just a census' to, 'Oh, this is actually going to help us manage drug use as best as possible', whereas at the moment I think most people that use drugs do not really trust the household survey. That is just my hunch, but—

Ms DALY: To add to Gulliver's point, and I guess to dig in on some of the things that Jesse said with health campaigns, I will be blatant. The national drug household survey is boring. It does not engage you. It is not exciting, and I get that statistics cannot always be fun and exciting. But when Triple J is telling you that they want to talk about cannabis use it sounds juicy and it is an approachable side. It is a current trend rather than a rinse and repeat. I think there is also a side of trust. It is like: what are people going to do with the data? There is a bit of trust when Triple J rings and it is going to create a cool conversation and maybe spark a few interesting discussions. When you are doing the national direct household survey, what are you trusting? Is someone going to put a little tag on your phone number? So I think those are interesting things to consider about who is presenting our attempts to collect data from young people.

The CHAIR: Yes, I think that is a really well-made point, Julia. In looking at your submission and looking around a regulated and legalised system we have seen in lots of other jurisdictions that they have looked at the minimum age. In some jurisdictions we are seeing it at 18, in some we are seeing it at 21. We saw recently in the New Zealand proposal that they would restrict it to a minimum age of 20. Does SSDPA have any position on where we should draw that line? I do not know if you saw in the previous conversation that it was around the developing brain and around trying to reduce that early onset or people starting later in life.

Ms DALY: So we do not have a position that I think we would be willing to speak on behalf of all I guess our young people in Australia regarding that, but we do have a few points that we have been investigating that will help us hopefully reach that decision in the future. I guess one of those important considerations is that although there are developmental harms when consuming cannabis from, let us say, the ages of 18 to 21, what are the odds that keeping the age at 21 is going to stop 18 to 21-year-olds, technically adults, from consuming cannabis? Or is it better to give them a legalised model that has, for example, public health interventions embedded in it? So I think that those are the interesting questions that we are all working through.

Mr McLEAN: Yes, I think the actual legal number that you set it at is probably not going to matter as much as making sure that we are educating young people about why they should potentially delay their use, because if you set it at 21, then everyone who is 18 is like, 'Screw waiting for 21'. It just makes a mockery of the law, whereas if you actually then educate them in school and say, 'Hey guys, we know you're probably going to use cannabis. Can you just try and restrict as much use as possible while you are young and wait, because it is better for your brain'. I think that is a better way of actually building trust within people.

Mr COLLING: I would just like to add to that, just one quick thing. We definitely agree that cannabis causes harm in developing brains. It is something we do not deny, even slightly. But what we have found when talking to young people—like, for instance, I have been at a festival giving out harm reduction information and

have asked people walking past if they would like to come and learn about different types of substances and how to be safer on them if they choose to. Then I would have a person tell me, 'Oh, no, I don't do drugs. That's disgusting', while holding a beer and a cigarette in their hands, not understanding that what they were doing right then were drugs and that the things they were holding were harms. There is such a disconnect with the actual facts and what is happening, and it is completely informed by the legal status of these different substances.

The CHAIR: That was a beautiful note to end on, Jesse. Thank you. It was a very succinct end. Julia, Jesse and Gulliver, thank you so much. And to the SSDPA team, thank you all. As I mentioned, this is being recorded and you will receive a transcript of this hearing. Please have a look at it; make sure that we have not misrepresented you in any way or misunderstood what you have said, because ultimately that transcript will form part of our report and will make its way onto our website. Again, thank you.

Witnesses withdrew.